APPLICATION DATA SHEET

Inventor Information

 $\label{eq:continuous_section} \mbox{Inventor One Given Name::} \qquad \qquad \mbox{Lorenz J.}$

Family Name:: Bauer

Postal Address Line One:: UOP LLC

Postal Address Line Two:: P.O. Box 5017

City:: Des Plaines

State or Province:: IL

Postal or Zip Code:: 60017-5017 City of Residence:: Schaumburg

State or Province of Residence:: IL
Country of Residence:: USA
Citizenship Country:: USA

Correspondence Information

Correspondence Customer Number:: 23490

Electronic Mail One:: smcotugn@uop.com

Application Information

Title Line One:: Middle Distillate Selective

Title Line Two:: Hydrocracking Process

Total Drawing Sheets:: 8
Formal Drawings?:: Yes
Application Type:: Utility
Docket Number:: 105223

Representative Information

Representative Customer Number:: 23490